

Louisiana Long-term Care Real Choice
Systems Transformation Grant

**Second Annual Workgroup Formative Evaluation Report
Grant Year 3**

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Survey Results from the Second Annual Workgroup Formative Evaluation April 2009

The purpose of this report is to summarize the findings from the second annual workgroup formative evaluation for the implementation phase of the Louisiana Real Choice Systems Transformation Grant. This evaluation was conducted to help improve the grant implementation process as necessary, based on the process strengths and weaknesses assessed by the workgroup members. Following a brief discussion of the evaluation methods, this report presents the survey results and describes limitations and conclusions.

I. Methods

In collaboration with the Systems Transformation Grant staff, the Tulane University grant evaluation team revised the 72-item questionnaire from the first formative evaluation in 2008. Several questions were omitted due to inactivity of some grant workgroups, while other questions were added to assess new grant activities. The final survey for the second annual formative evaluation contained 75 items, including open and close ended questions. The questionnaire (Appendix 1) was designed to capture information about the strengths and weaknesses of workgroup and sub-workgroup processes; overall perceptions about the ability to achieve grant objectives; and satisfaction with grant staff, contractors, and the evaluation team.

The survey was entered into the online Vovici survey system, and skip patterns were programmed into the survey such that respondents would only be asked questions appropriate to the workgroups and subgroups in which they participate. With the exception of the initial screening question on workgroup participation, no other questions were required of respondents—meaning that variation could exist in the number of responses between items for each specific workgroup or subgroup.

As with the first formative evaluation, this survey's workgroup and sub-workgroup questions were directed only to the quality management and housing goals of the grant, because these are the goal areas in which the most grant work was focused during the second year of implementation. Thus, respondents who participated only in the Consumer Inclusion or an "Other" workgroup were not asked about workgroup participation, but were queried as to their overall perceptions about the ability to achieve grant objectives and their satisfaction with grant staff and the evaluation team.

Grant staff and workgroup leadership compiled contact information for participants in the housing (159 individuals) and quality management (49 individuals) workgroups. These lists lacked information about participation in subgroups. Because individuals may have participated in more than one workgroup area, some names appeared on multiple lists (e.g., housing and quality management). After the lists were merged, 207 unique individuals received invitations to participate in the survey.

On March 19, 2008, the first invitation was sent via email to the initial 207 potential respondents. Three reminder emails were sent (March 24, March 31, and April 3) to individuals who had not completed the survey by each date. In addition, the grant director sent two emails to potential recipients explaining the purpose of the evaluation and encouraging their participation. After two weeks in the field, the survey was closed to completion on April 3.

Responses to the survey were strictly anonymous. In the following results section, the male pronoun is used to describe a respondent's view only for purposes of readability and flow, not as an indication of identity.

II. Results

A. Response Rate

Of the 207 individuals invited to complete the survey, 82 individuals responded (40% response rate). Respondents were asked to identify all of the core workgroups and subgroups in which they had participated during the first year of implementation. Table 1 shows the distribution of respondents across the core workgroups and subgroups, as well as response rates for the workgroups where a calculation was possible based on knowledge of the number of invited participants.

Table 1: Number of Respondents in Workgroups and Subgroups

Workgroup/Subgroup	Invited (Number)	Responded (Number)	Response Rate
Quality Management Workgroup	49	27	56%
QM Leadership Workgroup	--	18	
DHH QM Interagency Team	--	9	
OAAS QM Steering Group	--	5	
Health Indicators Workgroup	--	2	
Waitlist Indicators Workgroup	--	1	
Support Coordination Monitoring Workgroup	--	6	
Licensing Workgroup	--	5	
Other		0	
Housing Workgroup	159	38	24%
Adult Residential Care (ARC) Group	--	4	
Overall Housing Advisory Group	--	17	
Housing Training Session	--	23	
Consumer Inclusion	--	5	
Other	--	21	

Note: Subgroup numbers may not equal the number of respondents from each core area, as individuals may have participated in more than one subgroup.

B. Quality Management

For each Quality Management (QM) subgroup that an individual reported participating in, the survey requested information on: (1) satisfaction with the number of group meetings, measured on a 5-point likert scale (Strongly Agree-Strongly Disagree); (2) perceptions about viewpoint being heard, being valued as a member, comfort with being a member, satisfaction with progress, and group effectiveness, measured on a 5-point likert scale (Always-Never); and (3) suggestions for improvements, measured in an open-ended question. The sections below detail the feedback for each subgroup. For open-ended items with more than three responses, a table of responses is provided in addition to a summary of responses.

QM Leadership Workgroup. As seen in Table 2 (pg. 4), of the 17 individuals who responded, satisfaction with the number of meetings being held was high (15 strongly agreed or agreed that they were satisfied). Most (16 individuals) reported that their viewpoint was heard always or often, they were considered a valued group member always or often, and they were comfortable being a group member always or often. Nearly all (15 individuals) reported that they were always or often satisfied with group progress, and many (13 individuals) also reported that the group always or often was effective in achieving its goals to date.

When asked for suggestions about improvements to the QM Leadership Workgroup, two individuals indicated they could not think of ways to improve the workgroup. One person suggested continued meetings and another suggested training the workgroup on various topics. Responses are located in Table 3.

Table 3: QM Leadership Workgroup Suggestions

Not sure.
Transform the system by training the workgroup about Quality processes vs. Executive processes; brainstorming vs. decision-making.
Nothing that I can think of.
Continue to have meetings to provide feedback so that the quality can continue

DHH QM Interagency Team. When asked about satisfaction with the number of subgroup meetings held, almost all (8 individuals) strongly agreed or agreed that they were satisfied. Eight respondents indicated that, always or often, their viewpoint was heard and they were considered a valued group member. Most (7 individuals) always or often were comfortable being a group member, and 2 were sometimes comfortable. Though most (6 individuals) were always or often satisfied with the group's progress, 3 respondents were sometimes satisfied with group progress. There were 5 individuals who reported the group was always or often effective in achieving its goals to date. The remaining indicated that the group was effective sometimes in achieving its goals. Two individuals provided feedback on how to improve the workgroup. One individual suggested more communication about activities and progress. Another person indicated that there are too many layers of authority in the workgroup and, as such, some members' views are not heard and comments are not valued to the extent as those from DHH.

Table 2: Feedback on Quality Management Subgroups

	QM Leadership Workgroup	DHH QM Interagency Team	OAAS QM Steering Group	Health Indicators Workgroup	Waitlist Indicators Workgroup	Support Coordination Monitoring Workgroup	Licensing Workgroup
Satisfied with number of meetings							
Strongly Agree	4	2	0	1	1	3	0
Agree	11	6	2	0	0	1	3
Neutral	1	1	1	1	0	1	1
Disagree	1	0	2	0	0	1	1
Strongly Disagree	0	0	0	0	0	0	0
Viewpoint is heard							
Always	9	5	2	1	1	3	1
Often	7	3	1	0	0	0	3
Sometimes	1	1	2	1	0	2	1
Rarely	0	0	0	0	0	0	0
Viewed as valued member							
Always	7	3	1	1	1	2	1
Often	9	5	2	0	0	0	2
Sometimes	2	1	2	1	0	2	1
Rarely	0	0	0	0	0	0	0
Comfortable with the group							
Always	11	6	2	1	1	2	2
Often	5	1	2	0	0	0	2
Sometimes	2	2	1	1	0	2	1
Rarely	0	0	0	0	0	0	0
Satisfied with group's progress							
Always	6	3	0	1	1	1	0
Often	9	3	3	0	0	2	2
Sometimes	2	3	1	1	0	2	2
Rarely	1	0	1	0	0	0	1
Group effective in achieving goals to date							
Always	8	3	0	1	1	1	0
Often	5	2	3	0	0	2	2
Sometimes	5	4	1	1	0	2	2
Rarely	0	0	1	0	0	0	1

Note: The five Likert scale items measuring frequency were asked on a five point scale (Always – Never). No individuals chose “Never,” so this category has been omitted from the table. Due to incomplete survey responses, the response tally may not correspond between items or with number of respondents reported in Table 1.

OAAS QM Steering Group. Two of the five respondents agreed that they were satisfied with the number of meetings held, while 1 was neutral and 2 disagreed. Three reported that their viewpoint was heard always or often, and 2 reported that their viewpoint was heard sometimes. Similarly, 3 said they always or often were considered a valued group member, while 2 indicated that they sometimes were considered a valued group member. Most (4 individuals) always or often were comfortable with the group. Three were often satisfied with the group's progress, 1 was sometimes satisfied, and 1 was rarely satisfied. Further, 3 said the group was often effective in achieving its goals, 1 indicated the group was sometimes effective, and 1 reported the group was rarely effective. None of the respondents provided suggestions for improving the workgroup.

Health Indicators Workgroup. Of the two respondents from the Health Indicators Workgroup, 1 strongly agreed that he was satisfied with the number of meetings held and 1 was neutral. Additionally, 1 indicated that "always" and 1 indicated that "sometimes": his viewpoint was heard always, he was considered a valued member, he was comfortable with the group, he was satisfied with group progress, and the group was effective in achieving its goals to date. Neither respondent provided suggestions for improvements to the workgroup.

Waitlist Indicators Workgroup. The one respondent from the Waitlist Indicators Workgroup strongly agreed that he was satisfied with the number of meetings held. Further, "always" his viewpoint was heard, he was considered a valued group member, he was comfortable with the group, he was satisfied with group progress, and the group was effective in achieving its goals to date. This respondent did not provide suggestions for improvements to the workgroup.

Support Coordination Monitoring Workgroup. When asked about whether they were satisfied with the number of subgroup meetings held, 4 subgroup members strongly agreed or agreed, 1 was neutral, and 1 disagreed. There were 3 individuals who said their viewpoints were always heard, but 2 said their viewpoints were heard sometimes. Two individuals reported they always were considered a valued group member, and 2 said they sometimes were valued. Similarly, 2 said always and 2 said sometimes they were comfortable being a group member. One individual was always satisfied with group progress, 2 were often satisfied, and 2 were sometimes satisfied. Likewise, one person said the workgroup was always effective meetings its goals, 2 said the group was often effective, and 2 reported that the group was sometimes effective. Two individuals provided suggestions for improvements to the workgroup. One suggested that information on workgroup progress be shared electronically before meetings and that those who cannot attend meetings be allowed to submit and share their comments to the workgroup. The other respondent indicated that the workgroup goals might be more achievable if this was not a dual agency project.

Licensing Workgroup. Three individuals in the Licensing Workgroup agreed that they were satisfied with the number of meetings held, 1 was neutral, and 1 disagreed. Four respondents said always or often their viewpoints were heard and they were comfortable being a group member, while 1 said sometimes this occurred. Three people reported that always or often they were viewed as a valued group member, and 1 individual said sometimes. Two were often satisfied with group progress, 2 were sometimes satisfied, and 1 was rarely satisfied. Likewise, two said often the group was effective in achieving its goals, 2 said sometimes, and 1 reported this rarely occurred. Three individuals gave suggestions for improving the workgroup (Table 4). In general, these respondents reported that workgroup progress is slow and could be facilitated by devoting more concentrated time to workgroup activities and streamlining the goals of the workgroup. Further, one individual requested information be shared in advance of meetings.

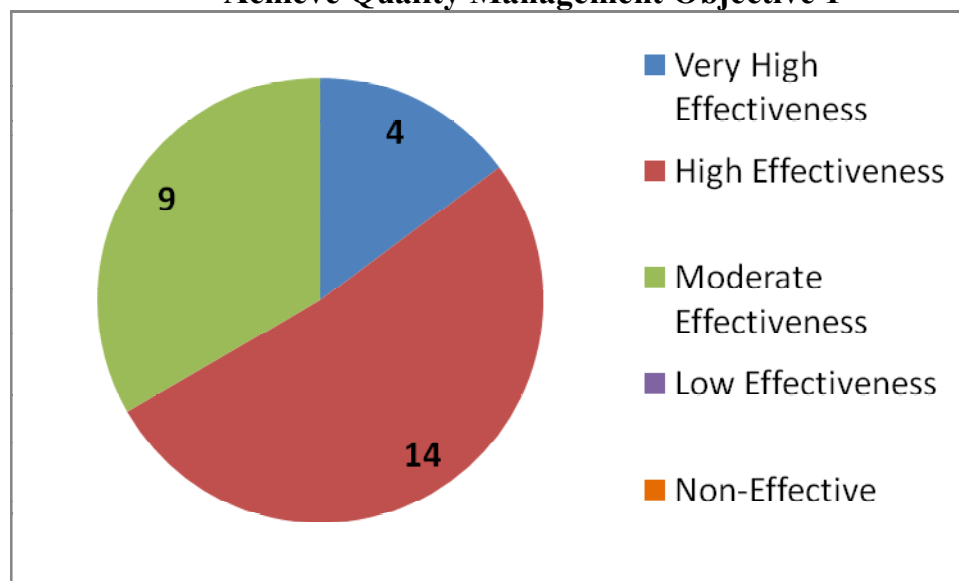
Table 4: Licensing Workgroup Suggestions

It's been moving very slowly to rewrite the licensing regulations. It might have moved faster if we had had a few all day sessions instead of 2 hour meetings every week or two.
There are too many interests that the work group is trying to accommodate. Progress is slow and very difficult to easily reach a consensus.
Again receiving information ahead of time and sharing information/read only on a Share point or method to view progress and or comments. Even minutes of meeting would be good.

Effectiveness Achieving Objectives. All QM workgroup participants were asked to evaluate the effectiveness of grant activities to date in achieving the grant's three core quality management objectives and barriers to achieving the objectives. Overall, respondents indicated that the grant had relatively high effectiveness to date.

- (1) **Quality Management Objective 1: "Develop and implement a comprehensive quality management strategy, consistent with the state's transformation of its long-term support system."** Of the 27 respondents to this item, 18 reported very high or high effectiveness to date in achieving this objective. Nine individuals reported that the grant had moderate effectiveness to date in achieving this objective.

Figure 1: Effectiveness of Grant Activities to Date to Achieve Quality Management Objective 1



Respondents offered many barriers preventing the achievement of Objective 1 (Table 5). Some of these barriers included lack of resources (5 responses), lack of appropriate data/data systems/IT (3 responses), disorganization/lack of responsibility among group members (3 responses), resistance to change (3 responses), and lack of staff (2 responses).

Table 5: Barriers Preventing Achievement of QM Objective 1

Lack of integrated data systems; having easily accessible data; resources to implement strategies
Putting into practice. More interest in data collection than actual outcomes.
Need a few more meetings to communicate where we are in accomplishing our goals and focusing efforts needed to accomplish the goals.
None.
The DHH administration does not seem as interested in implementing quality management as it once did. I know data is important, but not all data is a quality indicator.
Aligning roles and responsibilities with organizational structure seems to be the major barrier.
Funding; Resistance to change
Lack of field staff to implement the project.
Inadequate IT systems.
Resource issues; mainly workload of limited staff in Health Standards and to lesser degree in other offices plus turnover in key staff. Need to obtain data for QM measures from multiple data sources.
Lack of cooperation by 100% of providers & lack of follow-up to ensure quality
The major barrier I see is the silo effect -- quality management by program and not by department or individual whose needs cut across programs.
Length of time since the last meeting
Seems disorganized as to who is supposed to be on the "team"
Bureaucracy and reluctance to change
Development of the information technology solutions to support the ideas being generated.
Financial problems with state budget and resulting cut-backs in staff
Resistance from providers and case managers. Resources to carry out the needed tasks.
Very broad
None

- (2) **Quality Management Objective 2: “Develop and routinely disseminate quality management reports to key entities and other stakeholders, including but not limited to state and local agencies, participants, families, and other interested parties, and the public.”** Most of the 27 respondents (15 individuals) reported that grant activities had very high or high effectiveness to date in achieving this objective (Figure 2). Eight reported moderate effectiveness, and three reported low effectiveness. One person said that grant activities had been non-effective on this objective.

Respondents listed numerous barriers preventing the achievement of Objective 2 (Table 6). The most common barriers included dissemination issues (4 responses) and inadequate information technology systems to share data (3 responses).

Figure 2: Effectiveness of Grant Activities to Date to Achieve Quality Management Objective 2

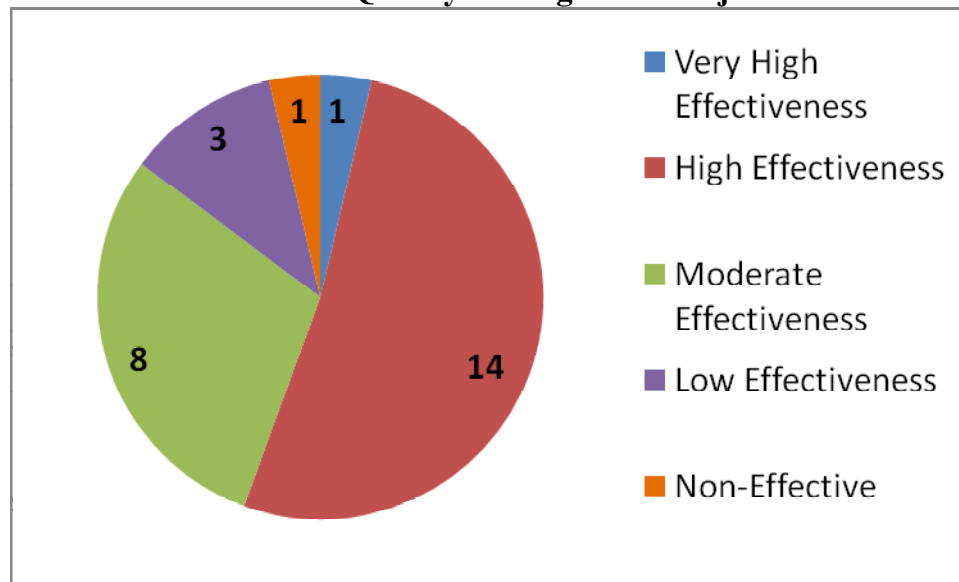
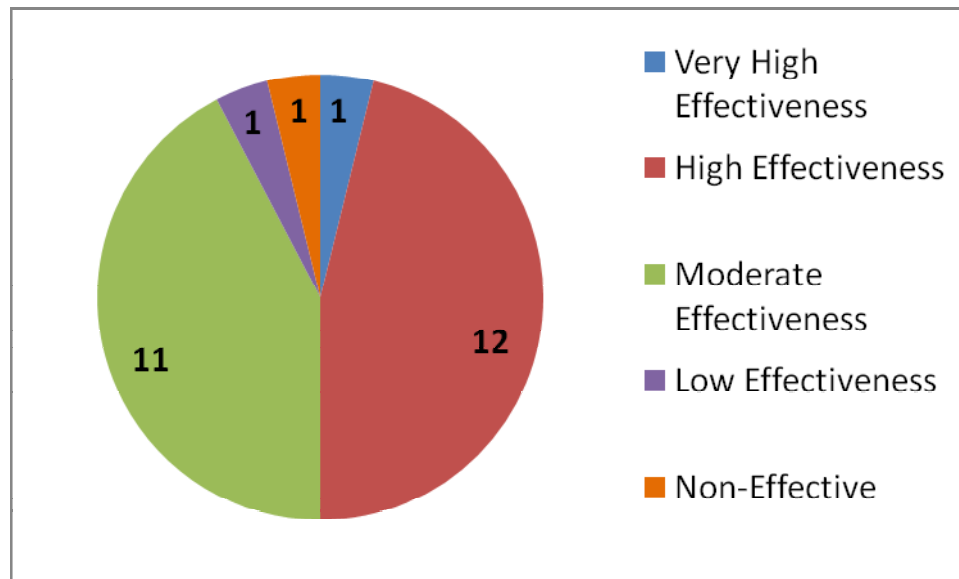


Table 6: Barriers Preventing Achievement of QM Objective 2

Lack of integrated data systems; having easily accessible data
Web access to public reports
Need to understand that quality is defined by each end user, each provider and the bureaucratic entities. Reports may satisfy one entity but not others.
Need to see a regular schedule of when we should expect reports about accomplishments and barriers.
None
I don't know, but as an interested stakeholder, I do not see reports, so they are not getting to the public.
An editorial committee or similar mechanism for finalizing reports.
Appropriate methods and formats
Lack of a data base in which to enter data and collect reports.
None
Data integration noted above delaying development of reports. No real barriers to dissemination once reports completed.
How will you get the info out? That's a problem
I haven't seen the reports, and I don't know what the barriers are.
None.
A reporting system where QM reporting is available
Changing the public's views and expectations
None
Need to start with a few Performance Indicators and increase. Too many PI's and need to qualify & can these be quantified. What outcome/purpose will we be obtaining from the information? I am concerned we are asking too much to be reported in the initial Phase 1 reporting.
None.

- (3) **Quality Management Objective 3: “Use integrated systems to monitor the quality of services rendered.”** Half of the 26 respondents reported very high or effectiveness of grant activities to date to achieve this objective (Figure 3). However, nearly half (11 individuals) reported moderate effectiveness. Further one individual reported low effectiveness, and another reported that grant activities on this objective had been non-effective to date.

Figure 3: Effectiveness of Grant Activities to Date to Achieve Quality Management Objective 3



Respondents listed numerous barriers preventing the achievement of Objective 3 (Table 7). The most common barriers were IT and data limitations (7 respondents) and lack of financial resources (5 respondents).

Table 7: Barriers Preventing Achievement of QM Objective 3

Lack of integrated data systems; having easily accessible data
IT
The slowness of bureaucracy.
This is being done and improved regularly.
I am not sure if the systems are integrated, so I cannot fairly answer the question.
Quality data systems integration and a monitoring protocol.
Identifying appropriate indicators
Resources.
Again, inadequate IT systems. Also, difficult to have adequate sample sizes to meet CMS requirements.
None.
The fact that we still don't have integrated systems. Major reason is funding but another is the need to continue to use existing "silos" and even develop new ones until we can obtain integration.
Explain what you mean and help providers with concrete ideas
As far as I know, there are no integrated systems.
Current state of the economy. Amount of time that has passed since the last meeting.
The number of recipients is so high. Hard to quantify what they are getting with current system.
The number of programs involved and the differences across programs in terms of process and support focus. Key indicators may be similar, but data elements that feed into each will likely be different and from different data sources.
Money and time
Resistance from providers and case managers. Resources to carry out the needed tasks.
Must be a shared opportunity and the cost.
None

Strategies to Achieve Objectives. Respondents were asked whether the grant was pursuing the right strategies to achieve the quality management objectives. Of the 27 respondents to this item, 26 said the grant was pursuing the right strategies. The one individual who reported that the grant was not pursuing the right strategies suggested that parallel and ongoing efforts to support monitoring and reporting are also necessary.

Satisfaction with Contractors. All respondents were asked to rate their level of satisfaction with the performance of the quality management contractors (June Rowe and Val Bradley of Human Services Research Institute [HSRI] and Julie Fralich and Maureen Booth of Muskie School, University of Southern Maine) in helping the workgroups achieve their objectives. Overall, satisfaction was high. Of 25 respondents, nearly all (24 individuals) were very satisfied or satisfied with their performance and 1 was neutral.

Several respondents provided specific feedback about how the quality management contractors' performance could be improved (Table 8). The most common suggestions were that the contractors should gather and use more information about the state's current service processes, as well as that increased communication from the contractors would be helpful.

Table 8: Suggestions for Improving Quality Management Contractors' Performance

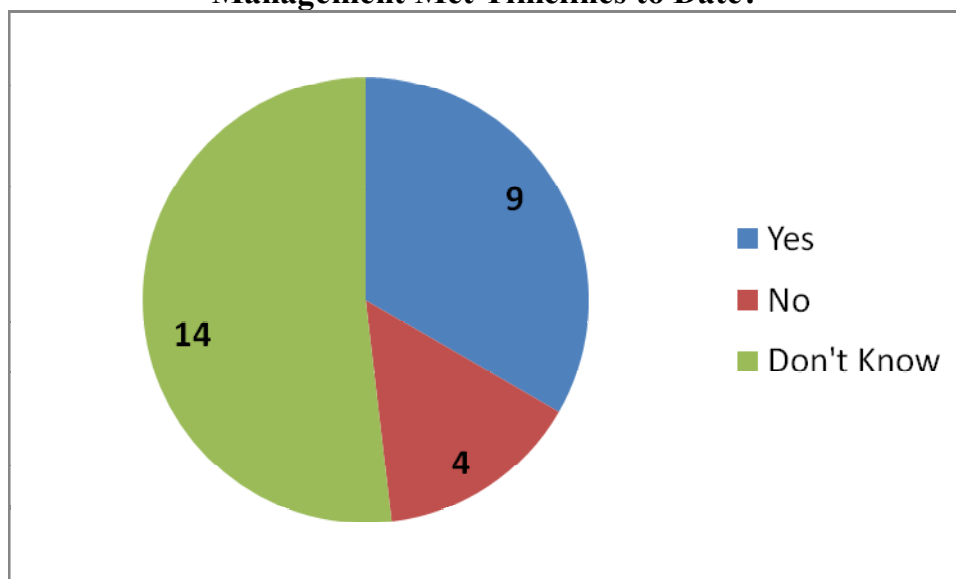
Focus on implementation.
Regular reports on their activities and work on the grant.
A small amount of improvement could be made in the area of obtaining more information on our processes that are already in place. I believe this action would result in a more customized fluid method.
Perhaps a little more contact with staff in between visits.
Listen and pay attention more to service recipients in developing processes.
Don't know because of lack of contact.
More routine correspondence with all affected entities, not just at the review/meetings
They are paid contractors and will provide what is requested. Concern of really getting deliverables for money spent on contract.
None

Additionally, respondents were asked whether the quality management consultants should be brought in more often, less often, or the same amount. Of 26 respondents on this item, 13 reported that the consultants were being brought in at the correct amount. Nine indicated that they should be brought in more often, and four indicated they should be used less often.

Respondents were also asked to rate their satisfaction with the performance of the quality management data analysis contractor (Mandi Jones). Overall, satisfaction was high. Of 27 respondents, 17 were very satisfied or satisfied with her performance. Three were neutral. Seven indicated that they were unable to judge.

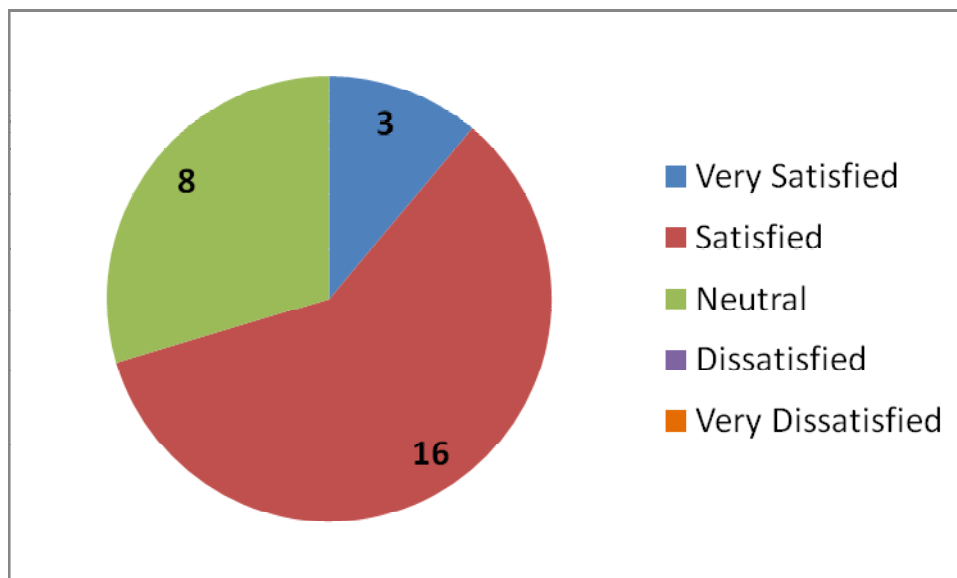
Grant Timelines. Most respondents (14 individuals) did not know whether grant activities related to quality management had met timelines to date (Figure 4). Nine respondents said that timelines were being met, and four said they were not being met. Reasons given for failure to meet timelines included busy schedules among responsible staff, unclear roles and responsibilities, and competing agency priorities.

Figure 4: Have Grant Activities Related to Quality Management Met Timelines to Date?



Satisfaction with Outcomes. Respondents highly rated their satisfaction with the outcomes to date for the quality management workgroups (Figure 5). Of 27 respondents, 19 were very satisfied or satisfied. Eight were neutral. Eight were neutral.

Figure 5: Satisfaction with Quality Management Outcomes



C. Housing

For each Housing subgroup that an individual reported participating in, the survey requested information on: (1) satisfaction with the number of group meetings, measured on a 5-point likert scale (Strongly Agree-Strongly Disagree); (2) perceptions about viewpoint being heard, being valued as a member, comfort with being a member, satisfaction with progress, and group effectiveness, measured on a 5-point likert scale (Always-Never); and (3) suggestions for improvements, measured in an open-ended question. The sections below detail the feedback for each subgroup. For open-ended items with more than three responses, a table of responses is provided in addition to a summary of responses.

Adult Residential Care (ARC) Group. As seen in Table 9 (pg. 14), three respondents agreed that they were satisfied with the number of meetings held for this group and one was neutral. All reported that always or often their viewpoints were heard, they were viewed as valued group members, and they were comfortable being part of the group. Though the majority reported always or often being satisfied with group progress, one was only sometimes satisfied. Similarly, 4 reported that the group was always or often effective in achieving its goals to date, while 1 said this occurred sometimes. One person provided specific feedback as to how to improve the workgroup, suggesting that the ARC Group research other workgroups and their process.

Overall Housing Advisory Group. Twelve of 15 respondents agreed or strongly agreed that they were satisfied with the number of group meetings held, while 2 were neutral and 1 disagreed that he was satisfied. The majority of respondents reported that always or often their viewpoints were heard, they were viewed as valued group members, they were comfortable being part of the group, they were satisfied with group progress, and the group was effective in achieving its goals to date. One individual suggested that the group could be improved if DHH could offer grants to promote housing development.

Table 9: Feedback on Housing Subgroups

	Adult Residential Care (ARC) Group	Overall Housing Advisory Group
Satisfied with number of meetings		
Strongly Agree	0	4
Agree	3	8
Neutral	1	2
Disagree	0	1
Strongly Disagree	0	0
Viewpoint is heard		
Always	1	7
Often	3	6
Sometimes	0	3
Rarely	0	1
Viewed as valued member		
Always	1	9
Often	2	4
Sometimes	1	3
Rarely	0	1
Comfortable with the group		
Always	1	10
Often	2	3
Sometimes	1	4
Rarely	0	0
Satisfied with group's progress		
Always	1	4
Often	2	7
Sometimes	0	5
Rarely	1	1
Group effective in achieving goals to date		
Always	2	4
Often	1	8
Sometimes	0	3
Rarely	1	2

Note: The five likert scale items measuring frequency were asked on a five point scale (Always – Never). No individuals chose “Never,” so this category has been omitted from the table. Due to incomplete survey responses, the response tally may not correspond between items or with number of respondents reported in Table 1.

Housing Workshops. Within the last year, the grant has supported two workshops for those interested in housing issues – one on Fair Housing and the other on Single Family Housing. Respondents were asked whether they attended either of these workshops and, if so, they were probed about satisfaction with the workshop and suggestions for improvement.

Thirteen respondents reported having attended the Fair Housing workshop. Nearly all (12 individuals) were very satisfied or satisfied with the amount of information provided at the workshop, but one person reported being very dissatisfied. All 13 individuals, however, were very satisfied or satisfied with the type of information provided. Four attendees of the Fair Housing workshop provided suggestions for improvement, primarily related to the content of the workshops (Table 10).

Table 10: Suggestions for Improving Fair Housing Workshops

There are several programs and funding streams. Need to consolidate into a resource directory in simple terms.
Get information out to the public. Let them know what are legitimate complaints and how to file and where to file a complaint
Try to engage the clinical staff from the OMH mental health centers who work directly with the consumers who may be eligible for these programs.
How can we access stimulus money for individual with cognitive disability?

Fourteen respondents reported having attended the Single Family Housing workshop. All were very satisfied or satisfied with the amount and type of information provided at the workshop. Two attendees of the Single Family Housing workshop provided suggestions for improvements. One respondent indicated that more workshops should be held at more locations. The other respondent asked that more examples be provided on how to complete the application.

Effectiveness Achieving Objectives. All Housing workgroup participants were asked to evaluate the effectiveness of grant activities to date in achieving the grant's three core housing objectives and barriers to achieving objectives. Overall, most respondents indicated that the grant very high or high effectiveness to date.

- (1) Housing Objective 1: "Improve the coordination of long-term supports with affordable housing."** Of the 38 respondents to this item, 22 reported very high or high effectiveness to date in achieving this objective (Figure 6). Thirteen individuals reported that the grant had moderate effectiveness to date in achieving this objective. Three people said that the grant had low effectiveness on this objective.

Respondents reported numerous barriers to achieving Housing Objective 1 (Table 11). Common themes included funding barriers, communication deficits, limited participation by private and state agencies, and the complexity of housing issues.

Figure 6: Effectiveness of Grant Activities to Date to Achieve Housing Objective 1

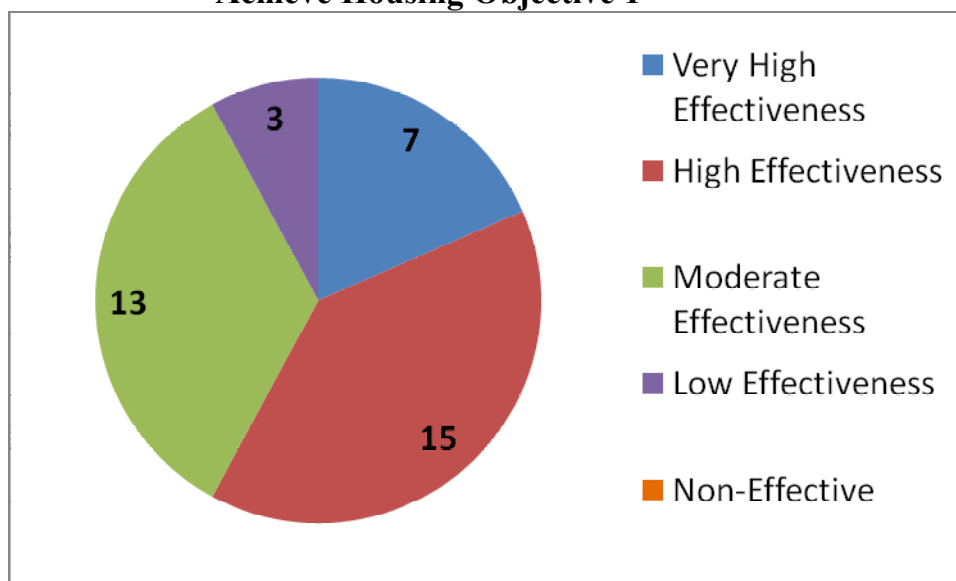
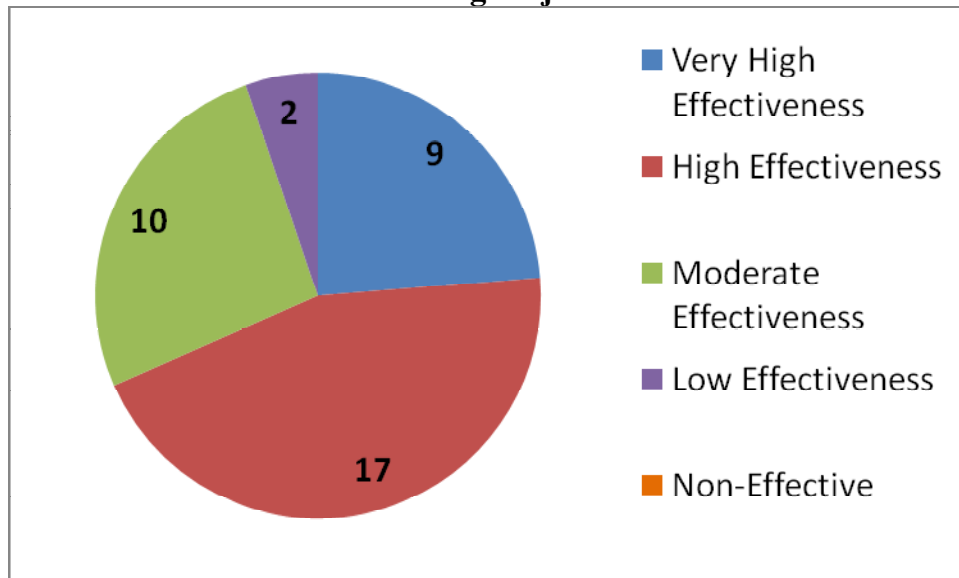


Table 11: Barriers Preventing Achievement of Housing Objective 1

Communication between various organizations
Housing is complex and needs continuous efforts that are "up to date."
Need to simplify.
Currently stable employment with a living wage for families is a serious impediment.
Continued Funding and implementation without red tape.
Hire someone to work full time on this effort.
The state is making HCBS more accessible, but some of the transition/entry timelines for MR/DD waiver services are inconsistent with the housing application, approval, and move-in process. Essentially people get their housing approved before the services are ready to go but can't move into the housing (from an institution) without services. They are then at risk of losing the housing to the next person in line.
Funding
Access issues for consumers....because the staff who deliver direct services need to know the information so they can disseminate with consumers.
Good statistics
State budget cuts limiting funds to individuals who receive long-term supports.
Areas to build these homes that are on public transportation routes.
Education and funds. Funds for support coordination/case management and assessment and services. Perhaps some type of agreement with a provider agency that knows how to support people. Each needed person can be allowed may \$1500-2000 pay for these supports. No need to create a new agency. Service providers are out there.
Getting the information to the public on how to apply and qualify for the grants.
Inclusion of Mental Health completely
Housing officials do not understand and/or see the value.
The Local Lead agencies for Permanent Supportive Housing Program appears to be working well in the areas where they are currently operating, however they are needed in other areas of the state as well.
More involvement needed by both state agencies and private sector organizations that provide supports to people with disabilities. (i.e., OCDD in all regions)
More networking needed with stakeholders.
Budget cuts have significantly reduced the state's capacity to provide long term supports in the community through both Medicaid and state general funding.
If you don't have something for the members to do, they will get bored and lose interest.

(2) **Housing Objective 2: "Increase the capacity of affordable and accessible housing."** Of the 38 respondents to this item, 26 reported very high or high effectiveness to date in achieving this objective (Figure 7). There were 10 individuals who reported that the grant had moderate effectiveness to date in achieving this objective, and 2 said the grant activities to date had low effectiveness to achieve this objective.

Figure 7: Effectiveness of Grant Activities to Date to Achieve Housing Objective 2



Many respondents suggested barriers to achievement of Housing Objective 2 (Table 12). The most common themes included funding constraints; issues related to the current economic situation such credit issues among consumers and lack of real estate investors; and lack of awareness among consumers, developers, and private and government agencies.

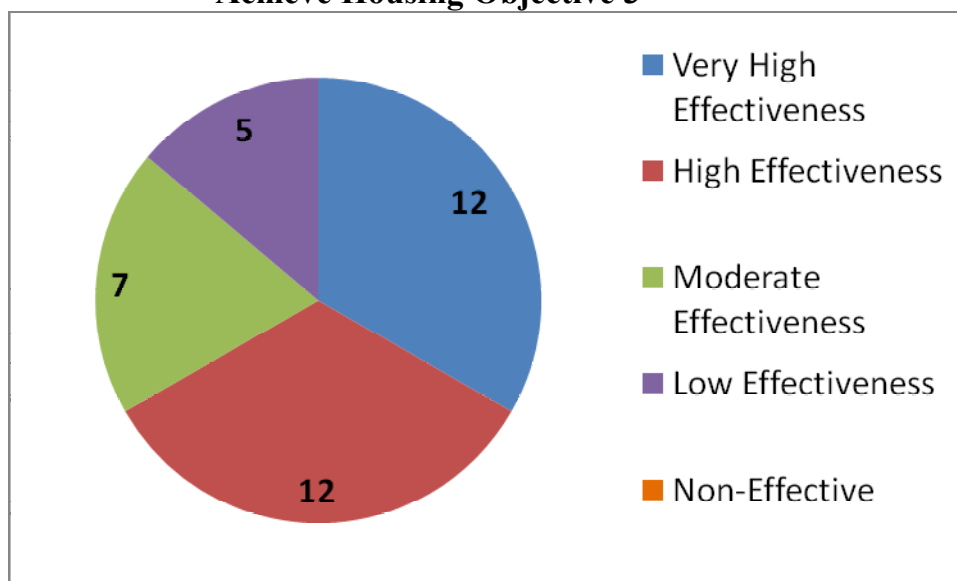
Table 12: Barriers Preventing Achievement of Housing Objective 2

The ready availability of long term supports impedes the ability to significantly expand the availability of affordable housing and supports. Housing developers are beginning to develop more affordable integrated housing but getting supports to people is a problem. Also the lack of availability of rental subsidies restricts the affordability of the affordable units being developed.
Funding
Need more rental assistance
One economic road block is the costs of building or rehabilitating single-family units versus apartment complexes and multi-family units.
Lack of awareness and knowledge on builders/architects part of what exactly accessibility/usability is.
Lack of knowledge on the part of individuals, provider organizations, governmental agencies, community developers, etc. Also, in the Bayou Region there is a lack of federal and state affirmative policies for the creation of affordable (as well as accessible) housing because of attitudes regarding coastal land loss.
Current economy, need for more housing vouchers, increase collaboration of funding sources, developers and advocates.
Advocacy information needs to be given to people so that they know what is going on and can advocate and know what to ask whom for.
Mental health inclusion completely
Assessing who will qualify for the programs when the word out is limited public knowledge in some areas.
Funds are out there. If needed, continue to increase in these areas. Develop relationships and partnership with financial institutions and developers and point out that we have a strong customer base who need these homes. Make sure the people value their homes.
Builders that are going to work with the limited funds available.
Individuals who are unable to pass credit checks due to unforeseen income decreases in their past.
Proving that needs exist
Access issues for consumers....because the staff who deliver direct services need to know the information so they can disseminate with consumers.
Funding
There needs to be more work done in areas of the state other than the go-zone.
Find ways to increase the number of vouchers available
Funding and changing the mindset of participants and providers. We must continue to advocate and utilize to a max what is already available. Current affordable housing needs to be safe and encouraged with support services.
With large companies failing it is difficult to find investors for affordable housing.
Need to reduce "red tape" and make the funding go more directly to consumers.
Funding
Economy, budget cuts and a lack of resources including human resources

(3) Housing Objective 3: "Increase access to affordable housing with long-term supports."

Of the 36 respondents to this item, 24 reported very high or high effectiveness to date in achieving this objective (Figure 8). There were 7 individuals who reported that the grant had moderate effectiveness to date in achieving this objective, and 5 said the grant activities to date had low effectiveness to achieve this objective.

Figure 8: Effectiveness of Grant Activities to Date to Achieve Housing Objective 3



Many respondents suggested barriers to achievement of Housing Objective 3 (Table 13). Themes included lack of funding for housing, lack of affordable housing, and lack of collaboration between agencies and communication from agencies.

Table 13: Barriers Preventing Achievement of Housing Objective 3

The availability of long term supports and rental subsidies.
Housing itself
More advocacy is needed.
At this time, probably the economic downturn and lack of capital.
Lack of: funding, education, resources, creativity, public awareness.
For the mental health population adequate funding for long-term supports continues to be a barrier and mental health stigma in the community at large.
Agencies do not talk to each other in a collaborative way.
Local information reaching the people.
Things are being done. Perhaps more PSA, school system and social service agency can give info on housing. Developers want to know that their properties will be care for and that all residents living there will be safe and respected.
Getting the word out to consumers who are interested in purchasing a home.
State budget cuts for individuals in need of long-term supports.
Access issues for consumers....because the staff who deliver direct services need to know the information so they can disseminate with consumers.
Economy
PSH is spreading in the go-zone, but there needs to be more education and more of a push in other parts of the state to catch up with the southern portion.
Build small housing unit with 4 to 8 apartments where people can share services.
Running out of money and manipulating waiting list to exclude the most needed just housing a disability that is easier to manage.
Need more funding for supports.
Continuity of effort
Funding

Strategies to Achieve Objectives. Respondents were asked whether the grant was pursuing the right strategies to achieve the housing objectives. Of the 38 respondents, 36 said the grant was pursuing the right strategies, and 2 said it was not. No suggestions were provided as to how the strategies should be modified.

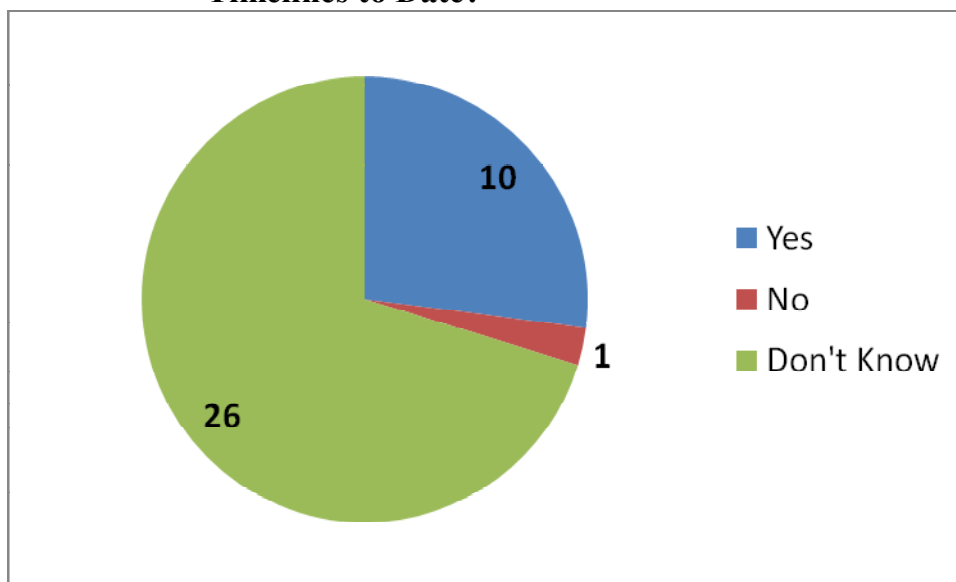
Satisfaction with Contractors. Questions about satisfaction with contractors were targeted to the specific workgroups interacting with each contractor. Respondents in the Adult Residential Care (ARC) Workgroup were asked to rate their satisfaction with the performance of NCB Capital Impact. Three of the respondents were very satisfied or satisfied with NCB Capital Impact, and one respondent was neutral. Two respondents offered suggestions for how the performance of the consultant could be improved. One suggested direct involvement of the consultant with a project to experience the process and how it works, and the other said NCB Capital Impact needed to better help develop solutions about residential care.

In addition, respondents in the Adult Residential Care (ARC) Workgroup were asked to rate their satisfaction with the performance of Allison Vuljoin. Three respondents were very satisfied or satisfied, and one was neutral.

Respondents from the Overall Housing Advisory Group were asked to rate their satisfaction with the performance of Social Serve, the contractor providing the LAHousingSearch website service. Among the 17 respondents, 13 were very satisfied or satisfied with Social Serve, 1 was neutral, and 1 respondent reported being unable to judge the contractor. Three respondents had suggestions for improving the website service. One respondent suggested more training so that people knew how to use the site, one suggested more landlord participation in the service, and another suggested an explanation screen could be added to the website.

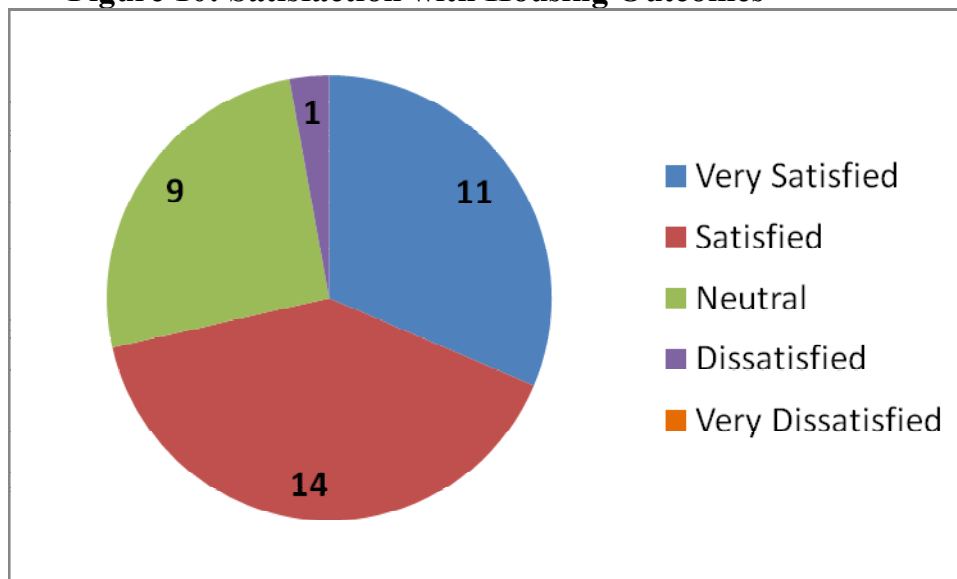
Grant Timelines. Most respondents (26 of 37 individuals) did not know whether grant activities related to housing had met timelines to date (Figure 9). Ten respondents said that timelines were being met, and one said they were not being met. No respondents provided reasons for the failure to meet timelines.

Figure 9: Have Grant Activities Related to Housing Met Timelines to Date?



Satisfaction with Outcomes. Respondents highly rated their satisfaction with the outcomes to date of the housing workgroups (Figure 10). Of 35 respondents, 25 were very satisfied or satisfied. Nine were neutral, and 1 reported being dissatisfied.

Figure 10: Satisfaction with Housing Outcomes



D. Overall Grant Activities

Likelihood of Achieving Remaining Goals. All respondents were asked to evaluate the likelihood that the grant will achieve its remaining unmet goals by the end of the grant period. Table 14 shows the responses for each of the three grant goal areas. Among 59 respondents able to judge the likelihood of achieving unmet housing goals, 29 thought the achievement of these goals were extremely or very likely. Over half of those able to judge the likelihood of achievement (33 of 62 individuals) reported that it was extremely or very likely that the grant would achieve its unmet quality management goals. And, of 60 respondents able to judge the likelihood, 28 reported that it was extremely or very likely that the grant would achieve its remaining information technology goals.

Table 14: Likelihood of Achieving Remaining Unmet Goals

	Enhancement of long-term supports coordinated with affordable and accessible HOUSING	Development of a comprehensive QUALITY MANAGEMENT program	Transformation of INFORMATION TECHNOLOGY (IT) to support long term care systems change
Extremely Likely	10	8	8
Very Likely	19	25	20
Moderately Likely	21	22	17
Slightly Likely	10	6	13
Unlikely	1	1	2
Not Applicable/Unable to Judge	17	15	16
Total	78	77	76

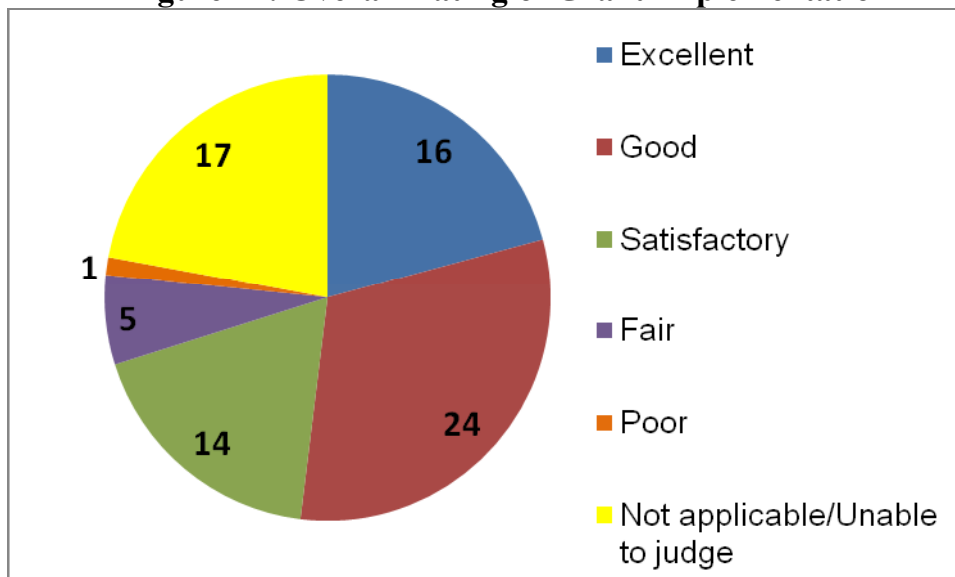
Table 15 presents respondent suggestions as to how to improve the chances for meeting the goals of the grant. Common themes included increased and continued financial support, prioritization of IT systems, and increased communication with stakeholders.

Table 15: Suggestions for Achieving Remaining Unmet Goals

Most of the barriers are internal - working though internal IT issues or dependent on other governmental entities (i.e. housing funding and implementation of new housing opportunities)
Keeping member informed and committed to the project
More funding & specialization of field staff in housing area (not just one more duty for busy staff).
After the grant is gone, who will fund these support efforts? Intentional neglect to utilize existing federal funding. Income does not cover expenses if a major financial crisis occurs.
The grant has made remarkable progress. It's really not possible to achieve "excellent" in all areas, due to the sheer amount of work and focus, but there is achievement, which is wonderful.
The right persons receiving the information to disseminate directly with the consumers.
Stop building silo IT systems that are separate from Medicaid IT. It is all Medicaid and will be implemented by them for the most bang for the buck
The IT goal needs emphasis, consultants, and internal staff. The workflow and work processes to be supported by IT need to be redesigned.
Continued Management support and funding
Additional funding to support staffing and technology needs.
Adequate IT systems have been a problem.
Getting information out to the community where the grants can be utilized.
The IT issue is just very, very complex as it involves multiple contracts, agencies, rules, budgets, etc.
Resist temptation to create new IT silos as a solution to perceived issues with current system.
I would think that dissemination of information might be difficult. Reaching the target group through social service personnel is a valid method, but perhaps you might work toward addressing the target group more directly.
Reaching people in areas where literacy is a problem by making presentations to them where they can ask questions about the application forms.
Provide technical assistance in each region - let people know the assistance it there
Agencies need to be committed to improving, esp. as relates to the IT goal, and a new infrastructure built that will allow easy access to a common database.
Clone Tammy LeBlanc.
More involvement and input and direction from the Department's Executive Management
Visit what other state are doing to improve their housing issues and visit government website for what's available in grants through government grants. Ask that housing be a high priority on the President's agenda, and advocate, advocate, advocate!
If state budget is cut, less federal funds will be available due to matching requirements; I am not sure this program has high enough status to compete
Grant needs to be extended. Significant natural disasters for 2 separate years have interrupted the state's overall ability to keep regrouping and moving forward.
Provide updates, as simple as an e-mail.

Overall Rating of Grant Implementation. Overall, most respondents (40 responses) rated the grant implementation to date as excellent or good (Figure 11). There were 14 who indicated the implementation has been satisfactory, 5 said fair, and 1 said poor.

Figure 11: Overall Rating of Grant Implementation



Satisfaction with Performance of Grant Staff. All respondents were asked to evaluate the performance of the three grant staff, and Table 16 presents the responses. Overall, ratings of staff performance were very high, with the vast majority of respondents indicating they were very satisfied or satisfied with grant staff. Many respondents provided suggestions as to how the performance of the grant staff could be improved (Table 17). The most common suggestion was for staff to lead more timely and organized meetings.

Table 16: Satisfaction with Performance of Grant Staff

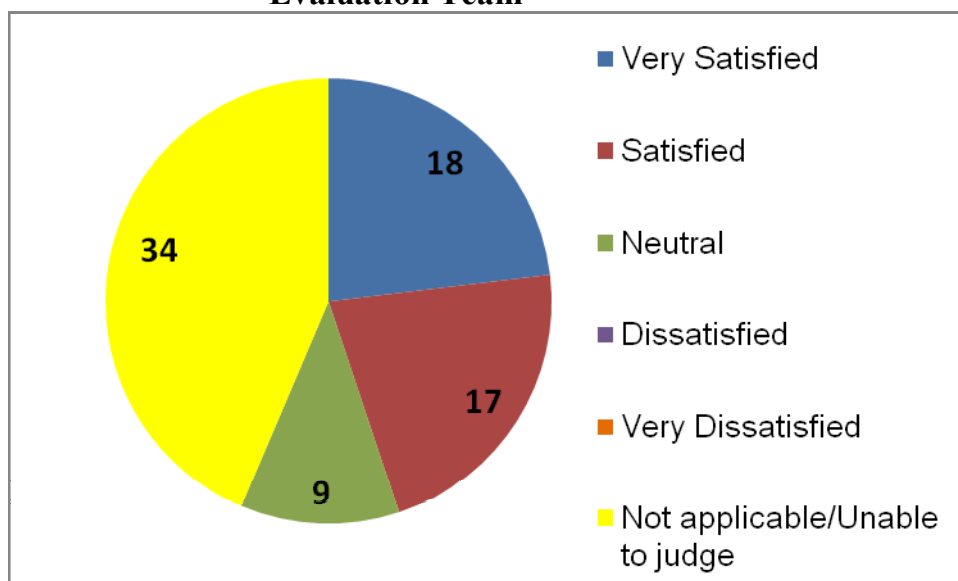
	Robin Wagner	Donna Thompson	Tammy LeBlanc
Very Satisfied	31	28	38
Satisfied	16	20	23
Neutral	5	4	6
Dissatisfied	3	0	0
Very Dissatisfied	0	0	1
Not Applicable/Unable to Judge	20	23	10
Total	75	75	78

Table 17: Suggestions for Improving the Performance of Grant Staff

The grant staff has done a great job working to meet some complex goals. Continuing flexibility and incorporating new strategies/methods in grant planning will help them be successful.
Start on time.
They all seem to be pulled in many different directions.
Follow regulations for procurement of contracts
Training, Team-building and Trust are required to transform the organizational culture and performance.
More outreach to the people that would benefit and qualify for the programs if they understood the qualifications process.
They need more staff just like them. More education and public awareness. Create "think tanks" for new and innovative ideas to address the goals. Use "REAL" people and not just figureheads of the various agencies and organizations.
It has been very disorganized without a clear vision
The sessions could be more organized
More timely and coordinated for appointments
More timely
Grant staff has been very helpful and have strongly supported system change. External circumstances, disasters, economic downturn, and the related staff changes that accompany those things have made it difficult for the larger stakeholder group to remain targeted.
Making an effort to communicate and update DHH stakeholders of Grants progress while being objective. Too rigid and becomes personal. It is not a personal project but an overarching systems change. Need to reevaluate what is being spent on the existing contract consultants and what is really left for consultation.

Satisfaction with Performance of Grant Evaluation Team. All respondents were asked to evaluate the performance of the grant evaluation team. Of those who felt able to judge the evaluation team, most (35 individuals) reported that they were very satisfied or satisfied with the grant evaluation team (Figure 12). Nine reported that they were neutral, and 34 were unable to judge the grant evaluation team.

Figure 12: Satisfaction with Performance of Grant Evaluation Team



Respondents were invited to suggest ways that the grant evaluation team could improve its performance. One individual suggested that the grant evaluation team could better communicate with stakeholder through the use of email reports. Three suggestions referred to the methods by which the evaluation team collects data: one suggested that the questions asked were not specific to all projects in the grant, one suggested more multiple choice questions, and another suggested the use of focus groups.

Furthermore, respondents were asked to suggest questions that the evaluation team was not asking but should be seeking answers to. Responses are provided in Table 18.

Table 18: Suggestions for Additional Evaluation Questions

Maybe include somewhere on the survey or just in the e-mail the deadlines or time periods for when the goals are expected to be completed. Those who are not working regularly with the grant may forget.
Were the budgeted items actually spent on the items identified in the application? Were the stakeholders identified included?
Is there evidence of value?
Have the grant team investigate our process in more depth.
What is needed to reach the public and get them to apply for the assistance that is available? How to reach the public and allow the local organizations to be there after the meeting to assist with additional questions with the forms?
The transformation and systems grant change evaluation team has listened to my requests for mental health systems inclusion change and I believe the evaluation team is aware, but due to the limited scope of the transformation systems change grant they are unable to meet my requests. In the future perhaps that can be accomplished in another systems change grant. I do believe that the evaluation team has performed in an excellent manner within the scope of the current grant and previous grants. I do believe the grant evaluation team has asked pertinent questions and do not foresee any other questions that could be asked by the evaluation team.
Perhaps present some case-studies of successful housing placements or home ownership situations.
What methods can be put in place to assure that all members can access information, updates, electronically ahead of time to all members? What deliverables have been received and what is actually not accomplished and really needed from consultants? Contracts and cost need to be reevaluated. Phase in plan for last needs.

Advice to Others Working on Systems Change. Additionally, respondents were given the opportunity to express their advice to others working on systems change. Their responses are located in Table 19. Common themes included good communication and dissemination of information, patients, active participation, and engaging necessary stakeholders from the beginning.

Table 19: Advice to Others Working on Systems Change

It takes dedication and persistent work toward documented goals and objectives
Set the example for others to follow by making the provider recognize our efforts as a best practice.
The STG team has done a great job of getting stakeholders involved and disseminating information. It has been very effective.
My advice would be to involve the professionals we had the pleasure to work with as well as be persistent. The outcomes are valuable.
Get the information to the right people.
Stay at it. It needs to happen, but it may take a few years.
Always include appropriate Medicaid staff in the planning of the Grant application as well as through the entire project.
Speak up.
Be patient and allow sufficient time for planning.
Get a complete familiarity with existing Inf. mgt. systems at technical, organization, and staff levels (i.e. in every aspect).
To remain encouraged. To continue to include multiple aspects of the discussion.
Communicate all area of concerns in a positive way so that we can move toward a solution.
Evaluate their staff and their understanding of the goal and mission of the program and ask them what they feel they can give to those in need to meet your goals.
Communication is key.
In order to move forward and beyond the goals of this grant there is a need for inclusion of mental health systems change. Without transformation of the entire system including mental health will not allow for effective systems change. Within the scope of the current transformation and systems change grant there has been significant improvement and implementation is due to the collaborative effort of all members. I do feel that Robin Wagner, Donna Thompson and Tammy LeBlanc have performed in an excellent manner. Due to collaborative efforts of all groups in the stakeholders meetings this has assisted Robin Wagner, Donna Thompson and Tammy LeBlanc to be effective in an excellent performance as per grant goals and achievements.
Involve consumers to the highest degree and in every aspect possible (as defined by the people themselves).
Include political sub-divisions
Participate. Participate. Participate. The success of the team so far has been because of the activity they have pushed throughout the state. Participation of as many people as possible is key.
To continue provide leadership and guidance to develop system changes
Please clarify goals/objectives; have all necessary participants involved from the beginning
Get up-dates from stakeholders within other agencies who are re-engineering their business operations (DSS and DHH)
When writing a grant it might be helpful if you put together an advisory council. That advisory council could meet monthly on housing issues and also have input about the grants being written.
Keep getting the information out to the public so there is community understanding and support
It is important that the top decision makers in the major systems continually be updated and involved in the transformation so that ancillary issues are decided in a way that will be favorable to the change goals.
Continue educational seminars
Re-evaluate Performance Indicators to be achieved and look at taking next steps in Phases.
Only participate in a small portion.

III. Limitations and Conclusions

Though the response rate to the second annual formative evaluation was higher than that achieved during the first formative evaluation, the response rate still was relatively low, particularly among the membership of the Housing Workgroups. Thus, caution should be taken when trying to draw conclusions from the data collected during this formative evaluation. A limited portion of grant participants provided feedback.

Nevertheless, some common themes emerged within the data.

- Whereas in the first formative evaluation housing respondents perceived fewer achievements on housing objectives than quality management respondents perceived on QM objectives, perceptions were near equilibrium in this second formative evaluation. Housing respondents and quality management respondents generally tended to rate grant activities as having very high or high effectiveness achieving the objectives of the grant.
- Similar to responses in the first formative evaluation, respondents across the workgroups continue to cite communication deficits. Further, a large proportion of respondents remain unaware of grant timelines.
- Satisfaction with contractors, grant staff, and the evaluation team remains high among respondents.
- Overall satisfaction with the grant process to date continues to be high among respondents.

Appendix 1

Implementation Process Evaluation

This survey is being conducted as part of the evaluation of the Real Choice Systems Transformation Grant that Louisiana received from the Centers for Medicare and Medicaid Services. The purpose of this survey is to assess the implementation process itself, and the information gathered will be used to determine whether and how the implementation process could be improved. This survey will be repeated several times over the years of the implementation of the grant.

Your responses will be kept confidential and individual comments that are cited in any reports will be kept anonymous.

1) In what workgroup(s) do you participate? (Please check all that apply.)

- Grant
- ☐ Workgroup(s) related to the QUALITY MANAGEMENT Goal of the Systems Transformation Grant
 - ☐ Workgroup(s) related to the HOUSING Goal of the Systems Transformation Grant
 - ☐ CONSUMER INCLUSION Workgroup (Strategic Planning Phase)
 - ☐ Other (please specify)

If you selected other, please specify

2) We are interested in your experiences with the workgroups in which you have participated. So that we ask you the appropriate questions, please indicate which of the following QM subgroups you have participated in. (Choose All That Apply)

- ☐ QM Leadership Workgroup
- ☐ DHH QM Interagency Team
- ☐ OAAS QM Steering Group
- ☐ Health Indicators Workgroup
- ☐ Waitlist Indicators Workgroup
- ☐ Support Coordination Monitoring Workgroup
- ☐ Licensing Workgroup
- ☐ Other (please specify)

If you selected other, please specify

3) Please indicate the extent to which you agree with the following statement. A sufficient number of meetings of the QM Leadership workgroup are being held to implement the activities listed in the strategic plan.

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree

☐ Strongly Disagree

4) Please indicate your perceptions about your work with the QM Leadership Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

5) Is there any way that QM Leadership Workgroup processes might be improved?

**6) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the DHH QM Interagency Team are being held to implement the activities listed in the strategic plan.**

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

7) Please indicate your perceptions about your work with the DHH QM Interagency Team.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8) Is there any way that DHH QM Interagency Team processes might be improved?

**9) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the QAAS QM Steering Group are being held to implement the activities listed in the strategic plan.**

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

10) Please indicate your perceptions about your work with the OAAS QM Steering Group.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

11) Is there any way that OAAS QM Steering Group processes might be improved?

**12) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the Health Indicators Workgroup are being held to implement the activities listed in the strategic plan.**

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

13) Please indicate your perceptions about your work with the Health Indicators Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

14) Is there any way that Health Indicators Workgroup processes might be improved?

15) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the Waitlist Indicators Workgroup are being held to implement the activities listed in the strategic plan.

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

16) Please indicate your perceptions about your work with the Waitlist Indicators Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

17) Is there any way that Waitlist Indicators Workgroup processes might be improved?

18) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the Support Coordination Monitoring Workgroup are being held to implement the activities listed in the strategic plan.

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

19) Please indicate your perceptions about your work with the Support Coordination Monitoring Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20) Is there any way that Support Coordination Monitoring Workgroup processes might be improved?

**21) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the Licensing Workgroup are being held to implement the activities listed in the strategic plan.**

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

22) Please indicate your perceptions about your work with the Licensing Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

23) Is there any way that Licensing Workgroup processes might be improved?

24) Please rate the effectiveness to date of grant activities to achieve the following objectives:

	Very high effectiveness	High effectiveness	Moderate effectiveness	Low effectiveness	Non-effective
"Develop and implement a comprehensive quality management strategy, consistent with the state's transformation of its long-term support system."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

"Develop and routinely disseminate quality management reports to key entities and other stakeholders, including but not limited to state and local agencies, participants, families, and other interested parties, and the public."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
"Use integrated systems to monitor the quality of services rendered."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

25) Is the grant pursuing the right strategies to achieve the QM objectives?

- ☐ Yes
- ☐ No

26) How should the strategies be changed?

27) What do you see as the major barriers or impediments to achieving the following grant objective: "Develop and implement a comprehensive quality management strategy, consistent with the state's transformation of its long-term support system."

28) What do you see as the major barriers or impediments to achieving the following grant objective: "Develop and routinely disseminate quality management reports to key entities and other stakeholders, including but not limited to state and local agencies, participants, families, and other interested parties, and the public."

29) What do you see as the major barriers or impediments to achieving the following grant objective: "Use integrated systems to monitor the quality of services rendered."

30) To what extent are you satisfied with the performance of the QM Consultants (June Rowe and Val Bradley of Human Services Research Institute [HSRI] and Julie Fralich and Maureen Booth of Muskie School, University of Southern Maine) in helping the QM Workgroups achieve their objectives?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied
- ☐ Not Applicable/Unable to Judge

31) How could the performance of the QM Consultants (June Rowe and Val Bradley of Human Services Research Institute [HSRI] and Julie Fralich and Maureen Booth of Muskie School, University of Southern Maine) be improved?

32) Should the QM Consultants be brought in more often, less often, or are they used the right amount?

- ☐ Use them More Often
- ☐ Use them Less Often
- ☐ No Change -- We're using them the right amount

33) To what extent are you satisfied with the performance of the QM data analysis contractor, Mandi Jones, in helping the QM Workgroups achieve their objectives?

- ☐ Very Satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied
- ☐ Not Applicable/Unable to Judge

34) To your knowledge, have the grant activities related to QM met timelines to date?

- ☐ Yes
- ☐ No
- ☐ Don't Know

35) Why have timelines not been met?

36) To what extent are you satisfied with the outcomes of the QM Workgroups thus far?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied

37) We are interested in your experiences with the workgroups in which you have participated. So that we ask you the appropriate questions, please indicate which of the following Housing workgroups you have participated in. (Choose All That Apply)

- ☐ Adult Residential Care (ARC) Group
- ☐ Overall Housing Advisory Group (originally known as DHH Housing Task Force)
- ☐ Housing Training session

38) Please indicate the extent to which you agree with the following statement. A sufficient number of meetings of the Adult Residential Care (ARC) workgroup are being held to implement the activities listed in the strategic plan.

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

39) Please indicate your perceptions about your work with the Adult Residential Care (ARC) Workgroup.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

40) To what extent are you satisfied with the performance of the NCB Capital Impact (the Adult Residential Care consultant) in helping the Housing Workgroups achieve their objectives?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied

- ☐ Very dissatisfied
- ☐ Not Applicable/Unable to Judge

41) How could the performance of NCB Capital Impact be improved?

42) To what extent are you satisfied with the performance of Allison Vuljoin in helping the Adult Residential Care Workgroup achieve its objectives?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied
- ☐ Not applicable/Unable to judge

43) How could Allison Vuljoin's performance related to achieving the objectives of the Adult Residential Care Workgroup be improved?

44) Is there any way that Adult Residential Care (ARC) Workgroup processes might be improved?

**45) Please indicate the extent to which you agree with the following statement.
A sufficient number of meetings of the Overall Housing Advisory Group (originally known as DHH Housing Task Force) are being held to implement the activities listed in the strategic plan.**

- ☐ Strongly Agree
- ☐ Agree
- ☐ Neutral
- ☐ Disagree
- ☐ Strongly Disagree

46) Please indicate your perceptions about your work with the Overall Housing Advisory Group.

	Always	Often	Sometimes	Rarely	Never
My viewpoint is heard.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am viewed as a valued member.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I feel comfortable in the group.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am satisfied with the group's progress.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The group has been effective in achieving its goals to date.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

47) To what extent are you satisfied with the performance of Social Serve (the contractor providing LAHousingSearch.org) in helping the Housing Workgroups achieve their objectives?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied
- ☐ Not applicable/Unable to judge

48) How could the performance of Social Serve be improved?

49) Is there any way that Overall Housing Advisory Group processes might be improved?

50) Did you attend the recent training on Fair Housing?

- ☐ Yes
- ☐ No
- ☐ Don't Know

51) To what extent were you satisfied with the amount of information provided at the Fair Housing training?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied

52) To what extent were you satisfied with the type of information provided at the Fair Housing training?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied

53) How might future trainings on Fair Housing be improved?

54) Did you attend the recent training on Single Family Housing?

- ☐ Yes
- ☐ No

55) To what extent were you satisfied with the amount of information provided at the Single Family Housing training?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied

56) To what extent were you satisfied with the type of information provided at the Single Family Housing training?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very Dissatisfied

57) How might future trainings on Single Family Housing be improved?

58) Please rate the effectiveness to date of grant activities to achieve the following Housing objectives.

	Very High Effectiveness	High Effectiveness	Moderate Effectiveness	Low Effectiveness	Non-Effective
"Improve the coordination of long-term supports with affordable housing."	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
"Increase the capacity of affordable and accessible	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

housing."					
"Increase access to affordable housing with long-term supports."	○	○	○	○	○

59) Is the grant pursuing the right strategies to achieve the Housing objectives?

- ☐ Yes
- ☐ No

60) How should the strategies be changed?

61) What do you see as the major barriers or impediments to achieving the following grant objective: "Improve the coordination of long-term supports with affordable housing."

62) What do you see as the major barriers or impediments to achieving the following grant objective: "Increase the capacity of affordable and accessible housing."

63) What do you see as the major barriers or impediments to achieving the following grant objective: "Increase access to affordable housing with long-term supports."

64) To your knowledge, have the grant activities related to Housing met timelines to date?

- ☐ Yes
- ☐ No
- ☐ Don't Know

65) Why have timelines not been met?

66) To what extent are you satisfied with the outcomes of the Housing Workgroups thus far?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied

67)

The goals of the grant are to transform the long-term care system in Louisiana by (1) enhancement of long-term supports coordinated with affordable and accessible housing, (2) development of a comprehensive quality management program, and (3) transformation of information technology (IT) to support long term care systems change.

How likely is it that the Louisiana Real Choice Systems Transformation Grant will achieve its remaining unmet goals by the end of the grant period?

	Extremely Likely	Very Likely	Moderately Likely	Slightly Likely	Unlikely	Not applicable/Unable to judge
Enhancement of long-term supports coordinated with affordable and accessible HOUSING	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Development of a comprehensive QUALITY MANAGEMENT program	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transformation of INFORMATION TECHNOLOGY (IT) to support long term care systems change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

68) Please comment on what could be done to improve the chances for meeting the goals of the grant.

69) Please indicate your overall rating for the Grant Implementation thus far.

- ☐ Excellent
- ☐ Good
- ☐ Satisfactory
- ☐ Fair
- ☐ Poor
- ☐ Not applicable/Unable to judge

70) To what extent are you satisfied with the performance of the grant staff?

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Not applicable/Unable to judge
Robin Wagner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Donna Thompson	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Tammy LeBlanc	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

71) How could the grant staff performance be improved?

72) To what extent are you satisfied with the performance of the grant evaluation team (Tulane University, Dr. Julia Hughes, Dr. Mark Diana, Bridget Lavin, and colleagues)?

- ☐ Very satisfied
- ☐ Satisfied
- ☐ Neutral
- ☐ Dissatisfied
- ☐ Very dissatisfied
- ☐ Not applicable/Unable to judge

73) How could the performance of the grant evaluation team be improved?

74) What is your advice to others involved with systems change moving forward?

75) Is there anything that the grant evaluation team should be asking about that they have not asked?

Thank you for taking the time to complete this survey.
-- Bridget Lavin & the Tulane Evaluation Team